

CARDIGANSHIRE COUNTY COUNCIL



ANNUAL REPORT of the MEDICAL OFFICER OF HEALTH and PRINCIPAL SCHOOL MEDICAL OFFICER for the year 1964

I. MORGAN WATKIN, PH.D. (Lond.), M.Sc., M.B., B.Ch., D.P.H (Wales)
County Medical Officer,
Principal School Medical Officer.

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ABERYSTWYTH

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CARDIGANSHIRE COUNTY COUNCIL.

Chairman 1964-65—Alderman D. REES MORGAN

Chairman 1962-63—Councillor B. J. DAVIES

HEALTH COMMITTEE—

Chairman 1962-65—Councillor the Rev. T. PUGH JARMAN

and all Members of the Council

HEALTH SUB-COMMITTEE—

Chairman 1962-65—Councillor the Rev. T. PUGH JARMAN

plus the Chairman and Vice-Chairman of the Health Committee, all Lady Members of the Council, 17 other Members of the Council, 1 representative of the Mid-Wales H.M.C., 1 representative of the South West Wales H.M.C., and 2 representatives of the Local Medical Committee

MENTAL HEALTH SUB-COMMITTEE—

Chairman 1962-65—Councillor the Rev. T. PUGH JARMAN

plus the Chairman and Vice-Chairman of the Health Committee, 7 Members of the Council, 2 Members of the County Education Committee, 1 representative of the South Wales and Monmouthshire Branch of the National Society for Mentally Handicapped Children, Dr. S. G. Budd, Dr. Michael Craft and Dr. Sidney Davies

BRYNTIRION HOUSE COMMITTEE—

Chairman 1961-65—Councillor JOHN LEWIS

plus the Chairman and Vice-Chairman of the Health Committee, 9 Members of the Council, Mrs. D. E. B. Jones and Dr. Sidney Davies

AMBULANCE SUB-COMMITTEE

Chairman 1962-65—Councillor the Rev. T. PUGH JARMAN

plus the Chairman and Vice-Chairman of the Health Committee, 17 Members of the Council, together with 1 representative of the St. John Ambulance Association, 1 representative of the British Red Cross Society, 2 Members of the medical profession, 1 representative of the Mid-Wales H.M.C., 1 representative of the South West Wales H.M.C., and 1 representative of the New Quay Ambulance Committee

HOME HELP ADVISORY COMMITTEE—

Chairman 1962-65—Councillor the Rev. T. PUGH JARMAN

plus the Chairman of Finance Committee, Chairman of Welfare Committee and Chairman and Vice-Chairman of the Health Committee

COUNTY EDUCATION COMMITTEE—

Chairman 1961-65—Alderman W. M. DAVIES, J.P.

plus all Members of the County Council and 10 co-opted members

There is no School Health Sub-Committee as such and all health questions are considered by the appropriate sub-committees of the Education Committee.

Health Officers of the Authority.

County Medical Officer and Principal School Medical Officer ...	I. MORGAN WATKIN, PH.D. (Lond.), M.Sc., M.B., B.Ch., D.P.H. (Wales).
Deputy County Medical Officer and Deputy Principal School Medical Officer	JOSEPH R. JONES, B.Sc., M.B., B.Ch. (Wales), D.P.H. (Liverpool), D.R.C.O.G.
Assistant Medical Officers ...	GWEN BEVAN, B.Sc. (Wales), M.R.C.S. (Eng.) L.R.C.P. (Lond.). BERYL EVANS JONES, M.B., B.Ch. (Wales), D.C.H. (Lond.), D.P.H. CLEMENT D. EDWARDS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.I.H. (Eng.), D.P.H. (Eng.).
Principal School Dental Officer ...	W. D. PERCIVAL EVANS, J.P., L.D.S., R.C.S. (Eng.)
School Dental Officers	E. BYRON LLOYD, L.D.S., R.C.S. (Eng.). S. D. NEALE, L.D.S., B.D.S.
Chief Nursing Officer, Supervisor of Midwives and Chief Health Visitor	MRS. A. M. DUDLEY-THOMAS, S.R.N., S.C.M., T.B. CERT., H.V. CERT.
Deputy Chief Nursing Officer, Deputy Supervisor of Midwives and Deputy Chief Health Visitor ...	MISS A. E. DAVIES, S.R.N., S.C.M., H.V. CERT.
Public Health Inspector	EVAN RICHARDS, A.A.L.P.A., M.R.S.I., CERT. S.I.B.
Social Worker	MISS GWYNETH RHŶS, Dip. Social Science (Resigned 24/8/64)
Mental Welfare Officers	J. R. EVANS, Aberystwyth (full time) T. ALUN EVANS, Aberaeron (part time) J. H. JOHNS, Cardigan (part time) (Resigned 31/8/64) T. S. EVANS (Commenced 7/9/64) W. J. MORRIS (part time) (Commenced 17/8/64)
Assistant Supervisors for Mental Health	MISS D. M. BEYNON, Dip. N.A.M.H. (Resigned 26/3/64) MISS E. GRIFFITHS, Dip. N.A.M.H.
Home Help Organiser ...	MISS M. G. REES
Assistant Home Help Organiser ...	MISS E. V. BLACKWELL (Resigned 13/11/64) MISS M. JONES (Commenced 7/12/64)
County Analyst	D. C. JENKINS, M.Sc., F.R.I.C., F.C.S.
Ambulance Sub-Controller ...	J. C. Blayney (Officer of the Order of St. John), F.I.A.O.
Health Visitors (each holding the H.V. Certificate of the Royal Sanitary Institute)	MISS D. M. DAVIES, J.P., S.R.N., S.C.M. MISS VALMAI DAVIES, S.R.N., S.C.M. MISS C. HUGHES EVANS, S.R.N., S.C.M. MISS N. N. JONES, S.R.N., S.C.M. MISS D. J. MORGAN, S.R.N., S.C.M. MISS M. MORGAN, S.R.N., S.C.M. MISS N. MORGAN, S.R.N., S.C.M. MISS M. MORRIS, S.R.N., S.C.M. MRS. S. E. MORRIS, S.R.N., S.C.M. MRS. ELUNED PHILLIPS, S.R.N., S.C.M. (Resigned 31/12/64) MISS MARY STEWART, S.R.N., S.C.M.

Orthopaedic Sister	...	...	Mrs. WINIFRED KOLCZAK, S.R.N., O.N.C.
District Nurse/Midwives	...	...	Nurse A. B. ATKINS, S.R.N., S.C.M., Aberaeron
			Nurse D. BEVAN, S.R.N., S.C.M., Llanfarian
			Nurse S. E. BOAST, S.R.N., Cardigan
			Nurse G. E. BOORE, S.R.N., S.C.M., Llandysul
			Nurse M. BOWEN, S.R.N., S.C.M., Llangranog
			Nurse A. DAVIES, J.P., S.C.M., Henllan
			Nurse A. DAVIES, S.C.M., Llanrhystud
			Nurse A. M. DAVIES, S.R.N., S.C.M. (County Relief) (Commenced 23/3/64)
			Nurse E. H. DAVIES, S.R.N., S.C.M., Lampeter
			Nurse R. S. DAVIES, S.R.N., S.C.M., Llanarth
			Nurse S. J. DAVIES, S.R.N., S.C.M., Pontrhydfendigaid (Resigned 31/7/64)
			Nurse J. H. DINGLEY, S.R.N., S.C.M., Aberystwyth
			Nurse B. EBENEZER, S.R.N., S.C.M., Llangetho (Died 15/11/64)
			Nurse E. M. A. EDWARDS, S.R.N., S.C.M., Tregaron
			Nurse D. ESAU, S.R.N., S.C.M., Aberporth
			Nurse M. E. EVANS, S.R.N. (County Relief)
			Nurse M. H. EVANS, S.R.N., S.C.M., Aberystwyth
			Nurse M. M. EVANS, S.R.N., S.C.M., Glandyfi
			Nurse S. H. EVANS, S.R.N. (County Relief) (Resigned 1/4/64)
			Nurse SULWEN EVANS, S.R.N., Llanwenog (County Relief)
			Nurse M. E. T. GWYNNE, S.C.M. (County Relief)
			Nurse J. A. HARRY, S.C.M., Mid-Aeron
			Nurse M. R. HARRIES, S.R.N., S.C.M., Llanwenog (Commenced 24/6/64)
			Nurse S. M. HUGHES, S.R.N., Devil's Bridge
			Nurse M. A. JAMES, S.R.N. (Temporary Relief)
			Nurse M. E. JARMAN, S.C.M. (County Relief) (Resigned 16/3/64)
			Nurse E. J. JOHN, S.R.N., S.C.M., Pontrhydfendigaid
			Nurse D. E. JONES, S.R.N., S.C.M., Llechryd
			Nurse GLADYS JONES, S.R.N., S.C.M., Melindwr

			Nurse I. M. JONES, S.R.N., S.C.M., (County Relief)
			Nurse VERA JONES, S.C.M., Cardigan
			Nurse K. LEE, S.R.N. (County Relief)
			Nurse A. E. LEWIS, S.R.N., S.C.M. (Temporary Relief) (Commenced 12/6/64)
			Nurse E. A. LEWIS, J.P., S.R.N., S.C.M., Rhydlewis
			Nurse M. M. MORGAN, S.C.M., Talybont
			Nurse G. MORRIS, S.R.N., Llanafan
			Nurse E. E. NORTHAM, S.R.N., Aberystwyth
			Nurse E. A. G. OWEN, S.R.N., S.C.M. (County Relief)
			Nurse R. M. REES, S.R.N., S.C.M., New Quay
			Nurse FRANKLIN THOMAS, S.R.N. (County Relief)
			Nurse M. G. THOMAS, S.R.N., S.C.M., Rhydpennau (Resigned 31/12/64)
			Nurse D. WALTERS, S.R.N., S.C.M., Lampeter
			Nurse M. WILLIAMS, S.R.N., S.C.M. (Temporary Relief) (Commenced 8/1/64)
Dental Attendants	...	...	MRS. D. M. WATSON, S.R.N. Miss MIRIAM THOMAS (Resigned 12/2/64) Miss W. A. P. MILLS Miss LYNN EVANS
Consultant Educational Psychologist (part time)			CYRIL B. E. JAMES, Ph.D., B.A., B.Ed., F.B.Ps.S.
Speech Therapist (part time)	...	...	MRS. B. EDWARDS.
Chief Clerk	...	...	D. OLIVER MORGAN.
Officers of the Regional Hospital Board who provide Specialist Services for the County Council.			
Chest	...	...	D. LLEWELYN DAVIES, M.R.C.S. (Eng.) ; L.R.C.P. (Lond.) J. T. JONES, B.Sc., M.B., B.Ch. (Wales) G. O. THOMAS, M.D. (L'pool) ; M.B., Ch.B. (L'pool)
Ophthalmic	...	...	T. EVANS JONES, M.R.C.S. (Eng.) ; L.R.C.P. (Lond.) ; D.O.M.S. (Eng.)
Orthopaedic	...	...	I. L. MACFARLANE, F.R.C.S. (Eng.) ; M.Ch. (Ortho.) (L'pool)
Ear, Nose and Throat	...	...	SALATHIEL MORGAN, M.B., B.Ch. (Wales) ; F.R.C.S. (Edin.)
Psychiatry	...	...	JOHN FARR, M.B., B.S. (Lond.) ; D.P.M. (Eng.) E. J. EURFYL JONES, M.A. (Oxon.) ; B.M., B.Ch. (Oxon.), D.P.M. (Eng.).
Psychiatry (Sub-normal)	...	...	MICHAEL J. CRAFT, M.D. (Lond.), M.B., B.S., M.R.C.P.Ed., D.P.M. (Eng.)
Child Psychiatry	...	...	J. McDONALD, M.A. (Glas.), M.B., Ch.B., D.P.M. (Eng.)
Geriatrics	...	...	J. C. DAVIES, M.B., B.S. (Durh.), M.R.C.P. (Ed.).
Hon. Consultant Psychiatrist	...	...	SIDNEY DAVIES, M.B., B.S. (Lond.), D.P.M.

To the Chairman and Members of the Health Committee

I have pleasure in presenting the Annual Report of the Health Department for the year which ended on 31st December, 1964.

The year under review can be regarded as one of steady progress in the field of health. A new comprehensive clinic was under construction at Aberystwyth, and a new maternity and child welfare clinic as well as a new mid-Cardiganshire ambulance station were being built at Lampeter. The new Junior Training Centre at Felinfach is nearing completion. The success of the mental health hostel at Tregaron necessitates its expansion and in view of the urgent demand for places the Council has decided to bring forward the date of its extension.

A comprehensive review of the work of district nurses and midwives was begun and it is hoped that when all the information requested by the Council is forthcoming, a more effective use of skilled manpower may be made especially as the shortage of trained midwives is becoming increasingly acute in the country as a whole.

The increase in road casualties, the expansion of Glangwili Hospital and the new hospital under construction in Aberystwyth will combine to make increasing demands upon the Cardiganshire ambulance service. Although there has been an increase in the number of consultant appointments to the Mid-Wales Hospital Management Committee area during recent years, it was never envisaged that a district general hospital would provide all the specialised services such as plastic surgery, neurosurgery, chest surgery, etc. As a consequence cases admitted to Aberystwyth Hospital from parts of Merionethshire and Montgomeryshire, as well as from Cardiganshire, and found to need specialised treatment of the type mentioned, become the responsibility of the Cardiganshire Ambulance Service when they have to be moved. The typical example is a road accident occurring in a part of Merionethshire or Montgomeryshire which is brought in by the ambulance service of the respective county to Aberystwyth Hospital. If the consultant at Aberystwyth Hospital decides that more specialised treatment is necessary, it is the Cardiganshire Ambulance Service which has to convey the injured person to Chepstow, Cardiff or Morriston as the case may be. Such journeys involve the absence of a driver and attendant for a whole shift and place a considerable strain on one's staffing resources at peak holiday periods.

The opportunity was taken of broadening the composition of the various sub-committees so as to maintain a closer link with the hospital and allied services. A representative from the Mid-Wales Hospital Management Committee and one from the South West Wales Hospital Management Committee were invited to serve on the Health and on the Ambulance Sub-Committees. The National Society for Mentally Handicapped Children was asked to nominate a member to serve on the Mental Health Sub-Committee and Dr. Michael Craft, the Welsh Hospital Board's consultant in subnormality, was invited to attend the meetings of the Sub-Committee.

During the year a number of staff left to take up other posts. Three retired after very long periods of service, namely, Captain J. H. Johns, the Mental Welfare Officer for South Cardiganshire, Nurse S. J. Davies, Pontrhydfendigaid, and Nurse M. G. Thomas, Taliesin, formerly of Borth. It is with regret that we record the death of Nurse B. Ebenczer, the district nurse for Llangeitho, who succumbed to a serious illness during the latter part of the year.

A fuller account of the year's work appears in the ensuing pages.

I. MORGAN WATKIN,
County Medical Officer

Section 1—STATISTICS
AREA, POPULATION AND RATEABLE VALUE OF THE COUNTY

TABLE I

	Aberaeron Urban District	Aberystwyth Borough	Cardigan Borough	Lampeter Borough	New Quay Urban District	Aberaeron Rural District	Aberystwyth Rural District	Telford Rural District	Tregaron Rural District	Total for County
Area in acres	388	1,141	4,928	1,754	281	99,321	140,728	73,102	121,546	443,189
Population (1961 Census)	1,209	10,427	3,789	1,855	954	9,014	11,227	10,358	4,815	53,648
Population Mid-1964 (Registrar General's Estimate)	1,220	9,920	3,850	2,080	950	8,930	11,320	10,300	4,680	53,250
Rateable Value at 1st April, 1964	£39,263	£388,572	£105,042	£67,316	£29,171	£106,213	£202,316	£169,681	£58,573	£1,166,147
Rateable Value at 1st April, 1965	£38,568	£395,665	£107,848	£68,327	£29,873	£106,587	£213,151	£172,636	£58,274	£1,190,929
Sum represented by 1d. rate 1964-65	£153	£1,550	£405	£268	£110	£418	£775	£659	£228	£4,566
Estimated sum represented by 1d. rate 1965-66	£153	£1,625	£429	£274	£110	£425	£853	£666	£226	£4,761

TABLE 2

VITAL STATISTICS

MOTHERS AND INFANTS

Live births

Number	...	...	...	...	...	766
Rate per 1,000 population	...	...	...	...	...	14.38

Illegitimate Live Births (per cent of total live births) ... 6.5

Stillbirths

Number	...	...	...	...	...	9
Rate per 1,000 total live and stillbirths	...	...	...	...	...	11.61

Total Live and Stillbirths ... 775

Infant Deaths (deaths under one year) ... 11

Infant Mortality Rates

Total infant deaths per 1,000 total live births...	...	14.36
Legitimate infant deaths per 1,000 legitimate live births	...	13.96
Illegitimate infant deaths per 1,000 illegitimate live births	...	20.00

Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births) ... 13.05

Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births) ... 13.05

Peri-natal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and still births) ... 24.51

Maternal Mortality (including abortion)

Number of deaths	...	...	...	...	—
Rate per 1,000 total live and still births	...	...	...	...	—

TABLE 3
CAUSES OF DEATH

<i>Registrar General's Code Number</i>	<i>Cause of Death</i>			<i>Number of Deaths</i>		<i>Total</i>
				<i>Male</i>	<i>Female</i>	
1	Tuberculosis, respiratory	...	...	3	1	4
2	Tuberculosis, other	...	...	1	1	2
3	Syphilitic disease	...	...	1	—	1
4	Diphtheria	...	...	—	—	—
5	Whooping cough	...	...	—	—	—
6	Meningococcal infections	...	...	—	—	—
7	Acute poliomyelitis	...	...	—	—	—
8	Measles	...	...	—	—	—
9	Other infective and parasitic diseases	...	...	1	2	3
10	Malignant neoplasm, stomach	...	...	14	9	23
11	Malignant neoplasm, lung, bronchus	...	...	16	4	20
12	Malignant neoplasm, breast	...	...	—	18	18
13	Malignant neoplasm, uterus	...	...	—	9	9
14	Other malignant and lymphatic neoplasms	...	...	35	32	67
15	Leukaemia, aleukaemia	...	...	1	2	3
16	Diabetes	...	...	4	5	9
17	Vascular lesions of nervous system	...	...	61	74	135
18	Coronary disease, angina	...	...	88	58	146
19	Hypertension with heart disease	...	...	5	7	12
20	Other heart disease	...	...	43	63	106
21	Other circulatory disease	...	...	13	25	38
22	Influenza	...	...	—	—	—
23	Pneumonia	...	...	10	19	29
24	Bronchitis	...	...	11	8	19
25	Other diseases of respiratory system	...	...	5	2	7
26	Ulcer of stomach and duodenum	...	...	1	—	1
27	Gastritis, enteritis and diarrhoea	...	...	3	1	4
28	Nephritis and nephrosis	...	...	—	1	1
29	Hyperplasia of prostate	...	...	4	—	4
30	Pregnancy, childbirth, abortion	...	...	—	—	—
31	Congenital malformations	...	...	5	4	9
32	Other defined and ill-defined diseases	...	...	23	44	67
33	Motor vehicle accidents	...	...	2	1	3
34	All other accidents	...	...	3	7	10
35	Suicide	...	...	4	3	7
36	Homicide and operations of war	...	...	—	—	—
Total				357	400	757

TABLE 4

CAUSES OF DEATH IN AGE GROUPS

	Under 4 weeks		4 weeks and under 1 year		1—		5—		15—		25—		35—		45—		55—		65—		75 and over		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Tuberculosis, respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	3	1	
Tuberculosis, other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	
Syphilitic disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other infective and parasitic diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malignant neoplasm, stomach...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malignant neoplasm, lung, bronchus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malignant neoplasm, breast	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malignant neoplasm, uterus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other malignant and lymphatic neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Leukaemia, aleukaemia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diabetes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Vascular lesions of nervous system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Coronary disease, angina	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Hypertension with heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other circulatory disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Influenza	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Bronchitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other diseases of respiratory system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Ulcer of stomach and duodenum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Gastritis, enteritis and diarrhoea	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Nephritis and nephrosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Hyperplasia of prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Congenital malformations	2	1	—	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other defined and ill-defined diseases	4	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Motor vehicle accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
All other accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Suicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	6	4	1	—	3	3	—	2	3	1	10	9	20	13	76	58	94	90	143	220	357	400		

TABLE 5

TABLE OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) NOTIFIED DURING THE YEAR

Sanitary District	Population Census 1961	Population Estimated 1964	Cholera	Diphtheria	Dysentery (amoebic and bacillary)	Encephalitis Lethargica	Erysipelas	Food Poisoning	Malaria	Measles	Meningococcal Infection	Ophthalmia Neonatorum	Paratyphoid Fever	Plague	Pneumonia (Acute Primary and Influenza)	Acute polio-myelitis	Acute polio-encephalitis	Puerperal pyrexia	Relapsing Fever	Scarlet Fever	Typhoid Fever	Typhus Fever	Whooping Cough	
URBAN :																								
Aberaeron ...	1209	1220	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Aberystwyth ...	10427	9920	—	—	1	—	—	—	—	117	—	—	3	—	1	—	—	—	—	—	—	—	—	
Cardigan ...	3789	3850	—	—	—	—	—	—	—	45	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lampeter ...	1855	2080	—	—	—	—	—	—	—	13	—	—	1	—	—	—	—	—	—	—	—	—	—	
New Quay ...	954	950	—	—	—	—	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—	—	
RURAL :																								
Aberaeron ...	9014	8930	—	—	—	—	—	—	—	7	—	—	—	—	—	—	—	—	—	—	—	—	1	
Aberystwyth ...	11227	11320	—	—	—	—	—	—	—	110	—	—	—	—	—	—	—	—	—	—	—	—	—	
Teifside ...	10358	10300	—	—	—	—	1	—	—	36	—	—	1	—	1	—	—	—	—	—	2	—	—	
Tregaron ...	4815	4680	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	
Total ...	53648	53250	—	—	1	—	1	—	—	334	—	—	6	—	2	—	—	—	—	—	2	—	—	1

TUBERCULOSIS NOTIFICATIONS, 1964, IN AGE GROUPS.

PULMONARY.

TABLE 6

District	0—		1—		2—		5—		10—		15—		20—		25—		35—		45—		55—		65—		75—		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Aberaeron Urban	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth Boro.	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	—	—	—	1	4
Cardigan Borough...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	2
Lampeter Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
New Quay Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	2
Aberaeron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	3
Aberystwyth Rural	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Teifside Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	2
Tregaron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	2
Whole County ...	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	1	1	2	—	—	—	3	1	—	2	2	17

NON-PULMONARY

TABLE 7

District	0—		1—		2—		5—		10—		15—		20—		25—		35—		45—		55—		65—		75—		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Aberaeron Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth Boro.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cardigan Borough...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lampeter Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
New Quay Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	2
Aberaeron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth Rural	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Teifside Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tregaron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	2
Whole County ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	1	—	—	—	—	—	1	—	—	—	5

Section 2

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Clinics

In view of the prevailing circumstances in Cardiganshire it is not the policy of the local health authority to run ante-natal clinics. At present ante-natal clinics are held under the aegis of the hospital at the Maternity Home, Aberystwyth. They are under the supervision of Dr. Geoffrey Williams, the consultant obstetrician. Domiciliary midwives, whenever possible, accompany the patients to the ante-natal clinics and health visitors give educational talks and film displays on matters connected with childbirth and the care of the infant. Relaxation exercises are held under the aegis of the hospital physiotherapist. This dual arrangement has been worked out in collaboration with the consultant obstetrician and the scheme is running satisfactorily.

At Glangwili Hospital, Carmarthen, the consultant obstetrician for West Wales also holds ante-natal clinics. These facilities are over and above those available to expectant mothers through their family doctor.

Care of Unmarried Mothers and their Children

Arrangements are usually made through the St. David's Diocesan Moral Welfare Committee for the confinement and care of unmarried mothers. Unmarried mothers may be admitted to a hostel outside Cardiganshire for some months before a confinement is due and kept for some time afterwards. The committee also assists in making suitable arrangements for the child.

Other expectant mothers leave home and go to London and the Midlands to seek refuge. Here they apply to the local authority for assistance and the latter contact Cardiganshire as the county of normal residence for a grant towards their maintenance.

Child Welfare

At the end of the year the new clinic at Aberystwyth was well under construction and steady progress was being maintained on the new Lampeter clinic. Both should be ready for occupation in 1965.

The details of infant welfare clinics held in the county are as follows :

<i>Centre</i>	<i>Where held</i>	<i>Day held</i>	<i>Total No. of infant attendances in the year</i>	<i>Average No. of infant attendances per session</i>	<i>Total No. of Sessions held</i>
Aberaeron	Memorial Hall, Aberaeron	2nd & 4th Friday in each month	365	15.87	23
Aberporth	Village Hall, Aberporth	1st Thursday in each month	151	12.58	12
Aberystwyth	Swyddfa'r Sir, Aberystwyth	Every Wednesday & Thurs. afternoons	1,915	18.41	104
Borth	Memorial Hall, Borth	Every other Thursday in each month	103	4.47	23
Cardigan	County Primary School, Cardigan	Every other Tuesday in each month	555	23.12	24
Lampeter	Ormond House, Lampeter	Every other Tuesday in each month	192	7.68	25
Llanbadarn	Church Hall, Llanbadarn	2nd & 4th Monday in each month	191	7.96	24
Llandysul	Graig Vestry, Llandysul	1st & 3rd Tuesday in each month	298	12.41	24
*Llechryd	Capel Isaf Vestry, Llechryd	2nd Tuesday in each month	21	2.33	9
New Quay	Memorial Hall New Quay	1st Monday in each month	11	1.00	11
Penparcau	Neuadd Goffa, Penparcau, Aberystwyth	1st, 3rd and 5th Friday in each month	345	12.77	27
Penrhiwllan	The Hall, Penrhiwllan	2nd & 4th Tuesday in each month	218	9.08	24
Pontgarreg	The Castle, Pontgarreg	3rd Monday in each month	25	2.08	12
Taliesin	Old Schoolroom, Taliesin	Every other Thursday in each month	238	9.52	25
Tregaron	Memorial Hall, Tregaron	1st & 3rd Tuesday in each month	844	32.46	26
Parcllyn	The Vestry, Parcllyn	3rd Thursday in each month	198	16.50	12
Ponterwyd	Ysgol Syr John Rhys, Ponterwyd	2nd Friday in each month	61	5.08	12
Ysbyty Ystwyth	C.P. School Ysbyty Ystwyth	2nd Wednesday in each month	76	6.91	11
		TOTAL	5,807	13.56	428

*—Closed 30/9/64.

Care of Premature Infants.

Each district midwife is supplied with a Cestra Premature Baby Outfit. Other specialised equipment for treating the baby at home and for transporting it to hospital is borrowed, by arrangement, from the Maternity Home, Aberystwyth.

Number of premature infants born at home	...	...	6
Transferred to hospital	...	...	1
Died within the first 24 hours	...	...	Nil
Died within the first 28 days	...	...	1

Dental Care.

The following data have been supplied by Mr. W. D. Percival Evans, the Principal Dental Officer.

The dental care of expectant and nursing mothers and of pre-school children is under the supervision of the Principal Dental Officer of the Authority. Full treatment is provided, including artificial dentures.

The following tables show the numbers treated and the type of treatment given during the year.

	No. of persons examined	No. who commenced treatment during year	No. of courses of treatment completed during year
Expectant and nursing mothers	60	60	60
Children under five ...	61	61	61

Forms of dental treatment provided :—

	<i>Scal- ings and gum treat- ment</i>	<i>Fill- ings</i>	<i>Silver Nitrate treat- ment</i>	<i>Crowns or Inlays</i>	<i>Extract- ions</i>	<i>General Anaes- thetics</i>	<i>Dentures provided</i>		<i>Radio- graphs</i>
							<i>Full Upper or Lower</i>	<i>Partial Upper or Lower</i>	
Expectant & nursing mothers ...	10	77	—	1	84	23	15	11	11
Children under five..	—	30	48	—	98	42	—	—	2

Welfare Foods.

The amount of welfare foods issued during the period can be seen from the following table :—

Commodity	Van	Clinic	Voluntary Distributors
National Dried Milk (tins)	3,072	3,368	4,544
Cod Liver Oil (bottles)	388	230	82
A. and D. Tablets (packets)	367	177	13
Orange Juice (bottles)	5,204	2,927	1,743

Details of bulk supplies received up to the end of the year are shown in the following table :—

Commodity	Quantity
National Dried Milk (tins)	11,088
Cod Liver Oil (bottles)	648
A. and D. Tablets (packets)	560
Orange Juice (bottles)	10,800

The amount of welfare foods issued during the year from the van at the various distribution centres is shown below :—

Centre	National Dried Milk	Cod Liver Oil	A. & D. Tablets	Orange Juice
Aberaeron	59	3	—	136
Aberystwyth	1,879	296	262	3,819
Cardigan	116	32	28	383
Lampeter	260	43	37	499
Llandysul	569	9	16	130
Tregaron	189	5	24	237
TOTAL	3,072	388	367	5,204

Family Planning Clinic.

A Family Planning Clinic under the aegis of the Family Planning Association is held at Aberystwyth. Sessions are held on the second and fourth Thursday of each month at Aberystwyth Hospital from 7.15 p.m.—8.30 p.m.

Child Life Protection.

The duties in connection with Child Life Protection are undertaken by the Care of Children Committee. Close liaison is maintained with the Children's Officer who notifies the Health Department of all children under five supervised by her. These are then visited by the health visitor.

Nurseries and Child Minders

No premises or persons are registered in Cardiganshire under the Nurseries and Child Minders Regulations, 1948, but the legal position in relation to three nurseries is being reviewed in consultation with the Clerk of the County Council.

Juvenile Courts

A report upon the health of all juveniles appearing in court is prepared in accordance with Section 35 of the Children and Young Persons Act, 1933. Medical reports where appropriate are submitted in accordance with Section 11 (iv) of the Summary Jurisdiction (Children and Young Persons) Rules, 1933.

Section 3.—MIDWIFERY

The Supervisor of Midwives received notification of intention to practise from 22 midwives in institutions and 34 domiciliary midwives. No refresher courses were taken during the year. The Supervisor and Deputy Supervisor paid 112 visits to domiciliary midwives and 13 to institutional midwives.

Seventy five births were delivered by domiciliary midwives and 800 by midwives in institutions.

It is the policy of the consultant obstetrician for Mid-Wales to have as many women as possible delivered in hospital. In view of the inaccessible nature of a large number of habitations in Cardiganshire, he feels that delivery in hospital, where every modern facility is available in the event of an unexpected emergency, is of paramount importance. As the number of hospital beds is limited, a substantial number of mothers have to be discharged home before the tenth day in order that this policy may be pursued.

Section 4—HEALTH VISITING

The Council employs eleven whole-time health visitors who also act as school nurses. Recruitment has, so far, presented no difficulty in Cardiganshire. Indeed the county is in the happy position of having several applicants for each advertised post.

For a trial period of one year the Council attached a health visitor to a group of practices in the north of the county. The reactions of the family doctors have varied and some have offered a number of interesting comments which I have discussed with the Regional Medical Officer of the Welsh Board of Health. One fact emerges, namely, that the role of the district nurse/midwife is more clearly understood than that of the health visitor.

A detailed account of the work of the health visitors is given in the ensuing table :

REPORT OF HEALTH VISITORS/SCHOOL NURSES FOR THE YEAR 1964

AREA	Infant Visits (0—5 years)	CLINICS ATTENDED		No. of visits to T.B., Blind, Orthopaedic, Mentally Defective Persons	SCHOOL WORK		
		M. & C.W.	All Others		No. of Visits to Schools	No. of children examined	No. of Children found verminous or suffering from Minor Ailments
Rhydypennau, Talybont and Glandyfi	2,033	120	—	28	77	2,275	100
Aberystwyth Town Centre and Devil's Bridge	1,335	62	1	15	76	1,607	5
Penparcau and Llanfarian	602	102	1	17	56	2,280	59
Penglais, Llanbadarn and Capel Bangor	1,503	50	—	1	52	942	47
Aberystwyth South	692	4	—	14	119	2,874	72
Aberaeron ...	1,544	20	9	13	136	4,566	38
Lampeter ...	1,180	27	8	33	151	3,771	70
Llandysul ...	1,494	45	33	69	121	3,398	14
Cardigan ...	2,039	42	16	231	104	7,869	59
Llangranog ...	1,455	34	2	83	94	2,296	24
Tregaron ...	2,393	36	—	65	135	1,889	16
Total ...	16,270	542	70	569	1,121	33,767	504

Section 5—HOME NURSING

The district nursing service in the county is in a state of flux and so far no clear cut pattern of future development has emerged. A survey is being undertaken at present and its main object is to try and ascertain why it is necessary to employ a considerably greater number of nurses in this county than in any apparently comparable rural county similar in population.

A large number of the staff is now married—if married women were not employed the nursing service could not be carried on—and when these receive maternity leave it is difficult to find short-term replacements. Furthermore the replacement may be a State Registered Nurse only and not a midwife. As a consequence the work in the neighbouring areas has to be re-organised. When many nurses in a particular part of the county become expectant mothers in a year, the re-arrangement of duties is frequent. This sometimes leads to confusion in the minds of the public but, under present circumstances, I see no alternative.

The total number of nursing visits paid in 1964 was 64,368 of which 11,456 were carried out by relief nurses.

Sick Leave

1,110 days were lost as a result of sick leave and maternity leave.

The following table gives details of the work of the district nurses.

REPORT OF DISTRICT NURSE/MIDWIVES FOR THE YEAR 1964

DISTRICT	MIDWIFERY				HOME NURSING			
	No. of Live Births	Total Number of Maternity and Midwifery visits	Total Ante-Natal visits	Number of Maternity and Midwifery cases nursed (under 14 days)	Total Nursing Visits	Total Number of visits to Elderly (included in total nursing visits)	Number of Injections only	Sick Leave (days)
Penparcau & Llanbadarn	6	985	71	62	1,297	729	107	—
Aberystwyth : Section I	7	432	49	29	1,607	746	167	—
Aberystwyth : Section II	1	796	—	49	1,656	1,073	285	—
Aberaeron ...	5	430	28	30	1,820	273	227	—
Aberporth ...	—	317	28	29	2,016	544	564	—
Cardigan : St. Dogmaels	5	566	38	34	2,086	530	307	—
Cardigan : Verwig ...	—	459	—	32	3,227	965	1,507	23
Devil's Bridge ...	—	32	31	5	1,812	1,480	274	—
Glandyfi ...	2	166	26	21	2,084	777	82	366
Henllan ...	—	229	130	14	2,091	131	422	18
Lampeter : Silian ...	5	386	483	33	1,739	869	332	3
Lampeter : Cellan ...	6	252	239	16	1,618	801	576	—
Llanafan ...	—	159	—	13	1,817	638	242	—
Llanarth ...	4	388	227	16	2,099	966	567	—
Llandysul ...	4	412	472	40	1,602	996	809	—
Llanfarian ...	1	238	28	36	1,701	1,236	275	—
Llangeitho ...	4	294	205	19	1,640	812	154	172
Llangranog ...	7	258	104	17	1,661	572	467	—
Llanrhystud ...	1	286	148	27	1,403	992	383	12
Llanwenog ...	3	166	150	12	1,547	759	441	115
Llechryd ...	5	299	71	24	2,097	798	360	—
Melindwr ...	1	238	51	22	1,904	1,249	254	8
Mid-Aeron ...	1	200	136	20	1,536	568	189	—
New Quay ...	1	123	67	11	1,355	872	358	—
Pontrhydfendigaid ...	1	68	14	8	1,284	619	417	121
Rhydlewish ...	1	256	132	17	1,962	761	378	—
Rhydypennau ...	—	471	10	20	2,053	1,814	235	—
Talybont ...	3	80	17	21	1,905	685	216	—
Tregaron ...	1	262	213	20	2,293	845	736	—
Relief ...	—	1,680	476	—	11,456	4,491	2,235	272
TOTALS ...	75	10,928	3,644	697	64,368	28,591	13,566	1,110

Section 6—PREVENTION OF BREAK-UP OF FAMILIES

Problem families are regularly visited by health visitors and, when the need arises, by the district welfare officers. In special cases, the health visitor calls in the Chief Nursing Officer, who, in turn, may call in the County Medical Officer.

Consultation with the Children's Officer of the County Council, the County Welfare Officer, the District Medical Officer and the County Medical Officer on the one hand, together with the chairmen of the appropriate committees and the local member on the other, takes place as and when the need arises.

The problems facing this type of family almost invariably find their way to the Home Help Advisory Committee. It is usually found that the provision of adequate home help to a harassed mother who may be below par, is the most effective and economical method of dealing with many problem families.

Section 7—VACCINATION AND IMMUNISATION

Smallpox Vaccination

In normal times this is carried out entirely by general practitioners. Records of the 315 successful vaccinations and re-vaccinations carried out in 1964 are as follows

<i>Age</i>		<i>Number successfully vaccinated</i>	<i>Number successfully re-vaccinated</i>
Under 1 year old	...	5	—
1 year old	...	85	—
2—4 years	...	84	3
5—14 years	...	2	16
15+	...	18	102

The number of registered live births for the year 1964 was 766 so that at the end of the year an estimated 0.65% of children under a twelvemonth had been vaccinated.

Diphtheria Immunisation

623 children were immunised and 63 booster injections given during the year, principally by general practitioners. The percentage of Cardiganshire children under a twelvemonth who were immunised was 27.09.

Poliomyelitis Vaccination

The following vaccinations were carried out during the year ended 31st December, 1964 :

<i>Salk</i>		<i>Oral</i>	
1st Injections	...	1 Dose	...
2nd Injections	...	2 Doses	...
3rd Injections	...	3 Doses	...
4th Injections	...	Reinforcing doses	...
Total	...	Total	...

The total numbers of vaccinations carried out since the scheme started are shown below :

Number who received course of 4 injections	...	3,850
Number who received course of 3 injections	...	15,248
Number who received course of 2 injections	...	13,411

Clinics were held at the following centres :—

Aberystwyth	Cardigan	Lampeter
Aberaeron	Llandysul	Tregaron

Whooping Cough Immunisation

Number of children who have completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the Authority's area during the year ended 31st December, 1964.

Year of birth	Number of children
1964	176
1963	107
1962	7
1961	3
1960	1
1955—1959	1
1950—1954	—
Total	295

In addition, 20 children were given reinforcing doses.

Tuberculosis—B.C.G. Vaccination

The number of children vaccinated against Tuberculosis was 594.

Section 8—AMBULANCE SERVICE

The County Council Health Department maintains eight ambulance vehicles which are stationed as follows :—

Aberystwyth ...	4 ambulances
New Quay ...	1 ambulance
Lampeter ...	1 ambulance
Llandysul ...	1 ambulance
Cardigan ...	1 ambulance

One relief ambulance is kept at Aberystwyth, if not required at one of the other stations. Another Aberystwyth ambulance is mainly used for infectious disease.

Delivery was made of two new ambulances during the year : a large Commer/Lomas four stretcher vehicle and a smaller Land Rover/Lomas dual purpose ambulance having a four wheel drive. The former was posted at Aberystwyth and the latter at Cardigan.

The number of patients conveyed by the Cardiganshire Ambulance Service increased from 15,284 in 1963 to 17,642 in 1964, and the number of journeys rose during the same period from 6,028 to 6,652. The mileage performed by ambulances during the year was 206,988. A further 4,065 patients, involving a mileage of 158,280, were conveyed at the request of the Ambulance Service by hired cars.

The number of emergency calls received during the year totalled 1,053. 754 were dealt with by ambulances, 279 by cars, 20 by other Authorities.

TABLE 14

	1962	1963	1964
Number of patients conveyed	11,977	15,284	17,642
Number of journeys made ...	5,095	6,028	6,652
Mileage covered	172,621	185,987	206,988

Ambulance Details, 1964

Station	Total number of patients conveyed	Emergency	Non-emergency	Number of journeys made	Mileage covered
Aberystwyth	11,759	367	11,392	4,763	83,010
Cardigan	1,514	149	1,365	732	35,813
Lampeter	1,774	83	1,691	422	30,700
Llandysul	1,400	69	1,331	410	30,846
New Quay	1,195	86	1,109	325	26,619
Totals	17,642	754	16,888	6,652	206,988

Sitting Car Details, 1964

	Total	Emergency	Non-Emergency
Number of patients conveyed	4,065	279	3,786
Number of journeys made ...	2,193	—	—
Mileage covered	158,280	—	—

Comparative Statements 1964 with 1963, quarter ended 31st December

<i>Year</i>				
WHOLE COUNTY			<i>Journeys</i>	<i>Patients</i>
1964	...	...	1,577	4,240
1963	...	...	1,636	4,164
Difference	...		— 59	+ 76
ABERYSTWYTH				
1964	...	...	1,138	2,888
1963	...	...	1,122	2,641
Difference	...		+ 16	+ 247
CARDIGAN				
1964	...	...	151	315
1963	...	...	227	476
Difference	...		— 76	— 161
LAMPETER				
1964	...	...	103	444
1963	...	...	112	409
Difference	...		— 9	+ 35
NEW QUAY				
1964	...	...	104	309
1963	...	...	97	372
Difference	...		+ 7	— 63
LLANDYSUL				
1964	...	...	81	284
1963	...	...	78	266
Difference	...		+ 3	+ 18

<i>Sources</i>		1963	1964	<i>Increase or decrease</i>
Hospitals	...	3,211	3,334	+ 123
Doctors	...	849	799	— 50
Nurses	...	2	2	...
Other Controls	...	24	33	+ 9
Police	...	4	12	+ 8
Emergencies	...	74	58	— 16
Welfare	...	...	1	+ 1
C.M.O.	...	...	1	+ 1
TOTALS		4,164	4,240	+ 76

Sitting Cars

	<i>Journeys</i>	<i>Patients</i>	<i>Mileage</i>
1964	500	969	36,331
1963	577	987	39,935
Difference	— 77	— 18	— 3,604

<i>Sources</i>	<i>December 1964</i>	<i>December 1963</i>	<i>Difference</i>
Hospitals	501	493	+ 8
Doctors	445	473	— 28
Nurses	4	6	— 2
Other Controls	13	3	+ 10
Emergencies	2	6	— 4
Welfare Officer	—	1	— 1
Mental Health	—	1	— 1
Welsh Board of Health	3	4	— 1
C.M.O.	1	—	+ 1
Totals	969	987	— 18

Overall Comparison

	<i>Journeys</i>	<i>Patients</i>	<i>Mileage</i>
1963 Ambulance ...	1,636	4,164	48,420
Sitting Car ...	577	987	39,935
Total	2,213	5,151	88,355
1964 Ambulance ...	1,577	4,240	49,972
Sitting Car ...	500	969	36,331
Total	2,077	5,209	86,303
1964	2,077	5,209	86,303
1963	2,213	5,151	88,355
Difference ...	— 136	+ 58	— 2,052

No patient required to be moved by helicopter during the year.

Section 9—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The local health authority's arrangements for the prevention of illness, care and after care are primarily related to tuberculosis, mental disorder and venereal disease but equipment for nursing at home and for the after care of patients is lent to persons suffering from a multitude of ailments.

Tuberculosis

Close association is maintained with the three chest physicians serving the county. Health visitors follow up contacts of tuberculosis patients and visit them in their homes following discharge. Where this is thought desirable, patients are sent to the Papworth Village Settlement.

Health Education

The Council has not finalised its arrangements for health education. Dr. Beryl Evans Jones has assumed the responsibility for this work for a trial period and the Health Committee will thereafter review the position.

The present health education methods include talks, and the use of films and posters. But in a scattered area, the work involved in organising an evening meeting when people are free is considerable. A team of lecturers supplied by the Central Council of Health Education gave anti-smoking lecture demonstrations to the senior forms of secondary schools throughout the county but it is difficult to assess their ultimate value at this stage.

Cervical Cytology

As soon as the obstetric and gynaecological unit at the new Mid-Wales Hospital, Aberystwyth, is completed it is anticipated that facilities will be available for cervical cytology. The Mid-Wales Hospital Management Committee is already making arrangements to train one of the technicians employed in the Pathology Department.

Congenital Defects

The doctor or midwife is asked to notify on the Notification of Birth form whether any congenital defect is detectable in the child. Arrangements are then made with the co-operation of the family doctor to ensure that a thorough examination of the child is carried out by the appropriate hospital consultant.

Incontinence Pads

Incontinence pads have been used by the district nurses for a number of years and if a request is received from persons being nursed privately, the pads are supplied at cost price. Sales during the financial year 1963/64 totalled £6.5.0d.

The method generally adopted for disposal is burning. No other method seems practicable in a rural area.

Section 10—HOME HELP SERVICE

The local authority provides home help on a very generous scale. An examination of the statistics shows, however, that about 88% of those receiving home help are of pensionable age. Were it not for the home help service, I have little doubt that even further calls would be made on the residential accommodation in the Council's Welfare Homes.

The Authority has one full-time organiser, one assistant organiser, one full time home help and 183 part-time home helps. The cases where home help was provided during 1964 are classified below :—

Maternity (including expectant mothers) ...	31
Tuberculosis	4
Chronic sick, including aged and infirm ...	267
Care of children	6
Blind	14
Total	<u>322</u>

Applications received during the year totalled 243. These were made up as follows :—

Blind	7
Tuberculosis	1
Care of children	7
Illness and old age ...	186
Maternity	42
Total	<u>243</u>

	Number provided with home help for first time during the year	Total number provided with home help during the year
Blind	3	14
Tuberculosis	1	4
Care of Children ...	5	6
Illness and old age ...	110	267
Maternity	21	31
Total	<u>140</u>	<u>322</u>

Visits paid to householders	1,017
Visits paid to home helps	735
Visits paid to Welfare Officers and District Nurses ...	37
Other visits	162

An analysis of the ages of persons receiving home help in the county gave the following results.

Age	Percentage
Over 100 years of age...	0.1
90—100 „ ...	6.5
80—89 „ ...	33.0
70—79 „ ...	38.1
60—69 „ ...	10.4
Under 60	11.9

Section 11—VENEREAL DISEASES

Dr. Vernon Williams, the consultant in venereal diseases for North and Mid-Wales is scheduled to hold a weekly clinic at Aberystwyth General Hospital. The southern part of the county is less well served as the nearest treatment centres are situated at Llanelly and Swansea. Contact is maintained with the venereologists and suspected cases are followed up by medical officers or health visitors.

No South Cardiganshire case was treated in Llanelly or Swansea according to the official return. This implies that there are (a) no cases, or (b) that the cases are treated by family doctors, or again (c) that some cases are not receiving treatment. Evidence obtained from a venereologist outside Wales suggests that the first possibility can be ruled out.

The known North Cardiganshire cases dealt with for the first time during the year were as follows :

<i>Venereal Disease</i>	<i>Male</i>	<i>Female</i>
Syphilis	—	—
Gonorrhoea	1	1
Other Conditions :		
Requiring treatment ...	7	4
Not requiring treatment ...	2	1

Section 12—NATIONAL ASSISTANCE ACT, 1948

The County Welfare Officer is responsible to the Welfare Committee for nearly all of the services carried out under the Act. Medical Officers of the Health Department, however, examine all applicants for entry into the Welfare Homes and also examine persons who are transferred from one Home to another. Routine visits to Homes in accordance with the Council's Proposals under Section 21 of the above Act are also made.

Since the introduction of the Handicapped Persons' Scheme, medical opinion on doubtful cases is obtained from the Health Department. An additional medical officer assumed duties towards the end of the year and medical assessment of handicapped cases was started in earnest.

Blind Welfare

There were 242 registered blind persons in the County at the end of the year. These were visited by the health visitors, by welfare officers and by the home teacher for the blind where tuition was considered practicable.

It will be seen from the following tables that the majority of blind people in Cardiganshire are over 70 years of age. The absence of industry and dangerous trades makes blindness following accidents an uncommon occurrence.

The following tables show the number of registered blind persons and the number of persons on the observation register at the end of the year.

REGISTERED BLIND (Ordinarily resident in the county).

<i>Age Group</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
0	—	—	—
1	—	—	—
2	—	—	—
3	—	—	—
4	—	—	—
5—10	—	—	—
11—15	—	1	1
16—20	—	1	1
21—29	—	1	1
30—39	3	4	7
40—49	5	4	9
50—59	4	7	11
60—64	8	8	16
65—69	12	10	22
70 and over	53	121	174
TOTAL	85	157	242

ON OBSERVATION REGISTER (Ordinarily resident in the county).

<i>Age Group</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
0—1	—	—	—
2—4	—	—	—
5—15	—	2	2
16—20	1	—	1
21—49	6	5	11
50—64	5	11	16
65 and over	22	59	81
TOTAL	34	77	111

Section 13—CARE OF CHILDREN

Routine medical examinations of children at Peterwell Home and Cartrefle and Erw Lon Family Units were carried out by medical officers of the Department. Boarded out children were also examined in the manner prescribed by statute. Close contact is kept with the Children's Officer, on the one hand, and with practitioners providing the children with general medical services, on the other.

Section 14—MISCELLANEOUS MEDICAL EXAMINATIONS

The Health Department carried out a large number of medical examinations during the year. These were undertaken for a variety of reasons. All new entrants to the superannuation scheme were examined as were all roadmen qualifying for admission to the Sick Pay Scheme. Entrants to Training Colleges were also examined and these numbered close upon a hundred. All Mid-Day Meals staff were submitted to examination. A number of examinations were carried out on behalf of other local authorities on a reciprocal basis.

All applicants for school transport on medical grounds, school absentees, handicapped pupils in various categories, and children applying for the deferment of the 11-plus examination on health grounds were examined.

Section 15—CHIROPODY SERVICE

The Chiropody Service in Cardiganshire is run under the aegis of a Voluntary Committee which receives a grant from the County Council. As the chiropody service is primarily intended for the aged, the Welfare Department is responsible for its general management and the Health Department plays no part in the running of the scheme.

The Voluntary Committee deals primarily with pensioners (males over 65 and pensioned females over 60). Handicapped persons of all ages are, however, accepted.

According to the information provided by the County Welfare Officer, the number of cases treated during the year was 2,255, an increase of 271 cases over the previous year.

Section 16—MENTAL HEALTH

Report of Dr. J. R. Jones, Deputy County Medical Officer

The national press has, at various times, mentioned a ‘revolving door’ policy in relation to mental hospitals, the suggestion being that patients are being discharged too soon from hospital and, consequently, re-admission is necessary. However, once psychiatric treatment is completed, further stay at a mental hospital is detrimental and the patient should renew his life in the community. Failures do occur as in physical illnesses and re-admission is necessary but this process definitely lessens the risk of spending years in a hospital and consequent disintegration of personality.

During the year, the rate of admission of patients to hospital from Cardiganshire has remained the same as 1963 but there has been a rise in the number of compulsory admissions and a decrease in those admitted informally. The changes are slight and probably not significant at this stage but a watch is being kept on the situation. The number of admissions undertaken by the Local Authority shows a marked increase and may be due to greater integration of the three parts of the health service.

Table A shows that 200 cases were investigated by Mental Welfare Officers during the year. As far as the division of work is concerned, the classification into three districts is entirely geographical as Mental Welfare Officers undertake duties in other areas when necessary. A total of 101 cases were admitted to hospital, 97 of these were to St. David’s, Carmarthen.

The cost of maintaining mental health services throughout the country is rising very sharply. The cost of such services in England and Wales in 1949/50 were just over one million pounds, whereas in 1963/64, the cost was some nine million pounds (Ministry of Health Annual Reports). Costly, but necessary, alterations are also taking place in mental hospitals and psychiatric wings are being built in the new district general hospitals.

The concept of community mental health services is still in its infancy, however, and more money will have to be spent in expanding the service. Co-operation between local authorities should minimize the risk of duplication and it should be possible for authorities to make use of another authority’s service, e.g., two subnormal youths from Cardiganshire have been transferred from Oakwood hospital to a hostel established by Flintshire County Council; they are well cared for in the hostel and remunerative employment is found for them. Gradually, they are integrating themselves once again into the community and the ultimate aim is to make them fully independant.

The opening of the Junior Training Centre at Felinfach did not materialize during the year but it will surely open in 1965. It is probable that there will be 30 children attending the Centre initially. Unfortunately, there will be insufficient trained Supervisors and it is hoped that trained teachers will be seconded from the Education Department—the employment of persons at the Training Centre merely to care for the children during the day is not sufficient and a positive approach in training must be maintained.

Table A

Statistics of cases investigated by Mental Welfare Officers :

<i>Cases referred by :</i>	<i>Aberystwyth District</i>		<i>Aberaeron District</i>		<i>Cardigan District</i>		<i>Total</i>
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
General Practitioners	22	50	4	3	13	17	109
Police or Courts	7	1	2	—	1	—	11
Hospital (in-patient or out-patient)	12	12	—	—	1	1	26
Other Sources	18	30	3	3	—	—	54
Sub-Totals ...	59	93	9	6	15	18	200
TOTALS ...	152		15		33		200

Table B

Statistics of admission by Mental Welfare Officers :

Number of patients admitted to hospitals for subnormal	...	...	2
Number of patients admitted to other mental hospitals ...	...	...	2
Number of patients admitted to St. David's Hospital, Carmarthen	...	...	97

<i>Method of Admission</i>	<i>Aberystwyth</i>		<i>Aberaeron</i>		<i>Cardigan</i>		<i>Total</i>
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
Informal ...	13	17	1	1	3	7	42
Section 29 ...	17	20	5	3	5	6	56
Section 25 ...	—	1	—	—	—	—	1
Section 26 ...	—	—	—	—	1	—	1
Section 60 ...	1	—	—	—	—	—	1
Sub-Totals ...	31	38	6	4	9	13	101
TOTALS	69		10		22		101
Transferred to S. 26 after admission	—	1	1	1	1	1	5

Table C

	1961	1962	1963	1964
Total number of admissions to St. David's Hospital	170	132	154	152
Admissions undertaken by Local Authority	93 (54%)	61 (45%)	86 (56%)	97 (65%)
Rate of admission per thousand population :				
Informal	2.2	1.7	2.0	1.8
Under Section	1.0	0.8	0.9	1.1
	—	—	—	—
	3.2	2.5	2.9	2.9
	—	—	—	—

Bryntirion Home, Tregaron

It would be sufficient to say that this mental health hostel has continued to serve its purpose and no undue difficulties have been experienced.

There is still a demand for further accommodation and it has been finally agreed to increase the complement to 34 beds. Other authorities are also expanding their mental health services and profit by experience gained at Bryntirion.

The success of this venture is due to the staff of the hostel for the work requires much patience and tolerance.

Table D shows the admissions and discharges during the year and Table E an analysis of these cases.

Table D

<i>Number of residents on 1st January, 1964</i>	...	30
<i>Admissions from</i>		
Welfare Homes ... ..	...	2
St. David's Hospital ... ..	...	1
Other hospitals ... ..	...	1
Home (including 3 re-admissions)	...	16—20
<i>Discharges to</i>		
Welfare Homes ... ..	...	1
St. David's Hospital ... ..	...	4
Other hospitals ... ..	...	2
Home or care of relatives ... ..	...	8
Died ... ..	...	5
Other mental hospitals ... ..	...	1—21
<i>Number of residents on 31st December, 1964</i>	...	29

Table E

<i>Diagnosis</i>	<i>Age Groups</i>				<i>Total</i>
	40—50	50—60	60—70	Over 70	
Senile Confusional State ...	—	—	—	5	5
Depression ...	—	3	—	1	4
Malnutrition ...	—	—	—	1	1
Organic Dementia ...	—	—	—	1	1
Paranoia ...	—	—	—	1	1
Manic Depressive ...	—	3	—	—	3
Others ...	—	1	1	3	5
Total Admissions including re-admissions	—	7	1	12	20

Section 17—SANITARY CIRCUMSTANCES

Milk (Special Designations) Regulations, 1963

These regulations, which consolidated and amended the 1960 Regulations, came into force during the year. The duties imposed on the County Council under these Regulations are : —

- (i) the licensing and supervision of milk pasteurising establishments.
- (ii) the licensing of dairies where milk is bottled other than at the place of production, and
- (iii) the granting of licences to retail milk which has been bottled at other premises and is obtained pre-packed by these retailers.

Another change brought about by these Regulations is that the designation 'Tuberculin Tested' milk, which had been used for nearly forty years, is replaced by the word 'Untreated' to indicate that the milk has not been heat-treated.

At the beginning of the year there were three licensed pasteurising establishments within the County, but one plant near Aberystwyth closed down during the year and another plant in Llanybyther was moved to new premises outside the County boundary. During the year sixty-one visits were paid to these plants to check on their operation and all the samples taken at these visits satisfied the phosphatase test for adequacy of pasteurisation.

Due to the very high cost of pasteurising machinery and that there are not many large centres of population to cater for, it would not be economically practical to expect large processing dairies to be established within the County, but there is a real need for the setting up of a few small "batch" type plants at farms which could supply about 50 gallons a day for retailing in the neighbouring towns. The demand for pasteurised milk is increasing, and this is amply illustrated by the fact that retailers in Aberystwyth have to obtain their supplies from Newtown and those at Cardigan obtain supplies from Swansea and Whitland. One such plant is now being installed at a farm near Aberystwyth, where the farmer has been granted a fairly substantial contract for the supply of milk to schools.

Routine visits were also made to the other licensed premises for checking on the handling, bottling and storage of milk. The number of licences in force at the end of the year were as follows :—

(1) Number of dairies where milk is bottled	...	...	...	9
(2) Number of premises licensed for the re-sale of pre-packed bottled milk				36

Diseases of Animals

Under Section 31 of the Food and Drugs Act, 1955, it is forbidden for any person knowingly to sell milk from any cow suffering from tuberculosis, infection of the udder, anthrax or foot and mouth disease. It is the duty of the County Council to enforce these restrictions and for that purpose there is close liaison with the Animal Health Division of the Ministry of Agriculture, Fisheries and Food, whose Veterinary Officers inform the Medical Officer of Health of possible sources of infection discovered at routine clinical examinations of dairy herds.

Five notifications of suspected Anthrax were received but only one of these was confirmed, and action was taken by the police under the provisions of the Anthrax Order to dispose of the carcase and to prevent the spread of infection.

Twenty-two samples of retail raw milk supplied to schools were submitted to the Public Health Laboratory at Carmarthen for biological examination, all of which proved negative for tuberculosis and Brucella Abortus.

Infectious Diseases

The table on page 11 shows the infectious diseases notified during the year. Apart from the usual outbreaks of measles, which occurred mainly in the Aberystwyth area this year, the only notifications of importance were six cases of paratyphoid fever, one of which proved fatal. Although there were six cases, they occurred in different parts of the county at different times of the year and there was no evidence of any connection between them. The exact source of infection was not traced in any of the cases, although there were significant pointers towards certain articles of pre-cooked foods in some. Such cases illustrate the need for scrupulous cleanliness when dealing with pre-packed cold foods, particularly by those engaged in preparing and handling the food.

Tuberculosis

During the year 22 new cases of tuberculosis were notified by the Chest Physicians, 17 being respiratory tuberculosis and the other 5 being non-pulmonary.

Each new case is investigated as to the environmental conditions at the home, in order to prevent the spread of infection, and any adverse conditions are reported to the District Medical Officer of Health for action by the local Sanitary Authority. Similar action is taken when a person is discharged from hospital. Premises and clothing are disinfected after admission of pulmonary cases to hospital and also in the event of a death at home.

The figures of new cases notified for the first time in each year since 1952 is given below :

<i>Year</i>	<i>New Cases</i>		<i>No. of Deaths</i>	
	<i>Pulmonary</i>	<i>Non-Pulmonary</i>	<i>Pulmonary</i>	<i>Non-Pulmonary</i>
1952	36	7	12	3
1953	47	2	14	1
1954	44	7	5	2
1955	37	5	4	1
1956	43	8	9	2
1957	35	8	6	1
1958	29	3	2	Nil
1959	30	8	5	Nil
1960	25	6	8	2
1961	33	5	8	Nil
1962	18	7	1	1
1963	23	5	1	1
1964	17	5	4	2

Housing

Under Section 116 of the Housing Act, 1957, it is the duty of the County Council to have constant regard to housing conditions in each rural district within its area with particular reference to overcrowding and other unsatisfactory housing conditions. It has also to see that sufficient steps are being taken by the district authorities to remedy these conditions and to provide additional housing.

New Housing

The following table shows the number of new dwellings erected by the various authorities during the year and also since the end of the last war :—

NEW HOUSES BUILT FROM 1945 TO 31.12.64.

	<i>Local Authority Houses</i>		<i>Privately Built Houses</i>	
	<i>Permanent</i>		<i>New Dwellings</i>	
	<i>No. under construction at 31/12/64</i>	<i>No. completed</i>	<i>Under construction at 31/12/64</i>	<i>No. completed</i>
Aberystwyth Borough	—	396	14	109
Cardigan Borough ...	22	281	14	127
Lampeter Borough ...	—	105	2	23
Aberaeron Urban ...	14	43	5	34
New Quay Urban ...	—	34	—	16
Aberaeron Rural ...	40	270	12	112
Aberystwyth Rural ...	—	346	56	396
Teifside Rural ...	17	316	76	179
Tregaron Rural ...	—	106	4	56
Whole County ...	93	1,897	183	1,052

In addition to the figures given above tenders had been accepted at the end of the year for the building of 32 houses by the Cardigan Borough Council, 26 by the Lampeter Borough Council, 2 by the Aberaeron Urban District Council, 58 by the Teifside Rural District Council, and 5 by the Tregaron Rural District Council.

Unfit Houses

Progress with the demolition of the older type of unfit houses continues to be rather slow as in most other areas of the country. This is due to the great demand that exists for houses of all types and authorities are naturally loathe to demolish a property if any person is prepared to carry out certain works that will lengthen its life by a few years. Such houses, if they are in an isolated rural position, are in great demand for holiday accommodation by visitors from the industrial areas who spend considerable sums of money in making them up as holiday cottages.

Whenever an unfit house becomes vacant through the death of the occupant or in the event of the tenant being re-housed, action is taken in serving a Demolition Order or a Closing Order and this is put into effect unless the owner is prepared to carry out the necessary works to put the house into a state of sanitary repair to render it fit for human habitation. The following table shows what action was taken by the four Rural District Councils during the year :—

<i>Name of Authority</i>	<i>Estimated No. of unfit houses</i>	<i>No. closed or demolished in 1964</i>	<i>Total No. closed or demolished since 1955</i>
Aberaeron R.D.C. ...	200	6	120
Aberystwyth R.D.C. ...	86	7	41
Teifside R.D.C. ...	366	—	14
Tregaron R.D.C. ...	213	4	33

Improvement of Existing Houses

In accordance with the policies of successive Governments to modernise existing houses, in addition to the building of new houses, in order to satisfy the need for more and better housing accommodation, all of the authorities have encouraged, by every means, the improvement of older houses by the giving of grants under the provisions of the Housing (Financial Provisions) Act, 1958. Most grants, however, are paid to owner-occupiers and it is disappointing to find that very few properties are improved for the purpose of re-letting.

During the year the maximum grant available under the Standard Grants Scheme was increased from £155 to £350 in these cases, where it is necessary to build a new bathroom as an addition to an existing house. Although this is still below the maximum figure of £400, under the Discretionary Grant Scheme, many houses did not qualify for the larger grant on account of certain defects such as minimum ceiling heights and the size of windows in the whole house and they were only grant-aided up to £155 irrespective of the amount of work involved in providing a bathroom. This amendment should encourage more owners to build new bathrooms rather than convert an existing bedroom for such a purpose.

The following figures show the number of grants approved by the four Rural District Councils during the year :—

<i>Name of Authority</i>	<i>Number of discretionary grants approved</i>	<i>Number of standard grants approved</i>
Aberaeron R.D.C. ...	37	23
Aberystwyth R.D.C. ...	29	5
Teifside R.D.C. ...	35	49
Tregaron R.D.C. ...	13	24

Rural Water Supplies and Sewerage Acts, 1944-61

Under the provisions of these Acts grants are paid by the Government towards the costs incurred by local sanitary authorities, or joint boards of such authorities in providing a mains water supply, or water-borne mains sewerage schemes, in rural areas. Where such a grant is paid, the County Council is likewise required to give a grant, and it is the County Council's policy to grant the equivalent of 50 per cent of whatever grant is made by the Ministry towards each individual scheme.

Copies of the County Council's observations on any particular scheme have to be submitted by the local authorities with their application to the Ministry but the decision as to whether a scheme is acceptable for grant purposes rests with the Ministry.

Water Schemes

The following applications for grant towards extensions of public water mains by the Cardiganshire Water Board were approved during the year :—

- (i) An extension of the mains to supply six farms above Llangwryfon.
- (ii) From Capel Seion to Glanpaith and Southgate in the Parish of Lower Llanbadarn-y-Creuddyn to supply ten farms and seven houses.
- (iii) From Llangwryfon to Rhosygarth to supply ten farms and one house in the Parishes of Llangwryfon and Llanilar.
- (iv) A supply for two properties and proposed public conveniences at Penbryn Beach.
- (v) A supply for two houses and three farms near Dolau, New Quay.
- (vi) A supply to the Falcondale Old People's Home, Lampeter, and six neighbouring houses.
- (vii) A supply to five houses in Aberarth.
- (viii) A supply to five houses and one farm in Goginan.
- (ix) An extension from Llanio Road to Llwynygroes and Capel Bettws Lleucu to supply twenty farms and nine houses.
- (x) A supply to eight farms near Bronant.
- (xi) An extension of the Llyn Craig-y-Pistyll Scheme from Capel Seion to Llanfihangel-y-Creuddyn, Cnwch Coch and Capel Cynon.

- (xii) A supply to four properties between Plwmp and Blaencelyn.
- (xiii) A supply to three properties on the outskirts of Gwbert.
- (xiv) A supply to two properties near Maesymeillion, Prengwyn.
- (xv) A supply to two farms near Rhydlewys, Cwrtnewydd.
- (xvi) A supply to four farms and three houses at Commins, Aberarth.
- (xvii) A supply to four farms and four houses from Llangeitho to Cilpyll.
- (xviii) A scheme to provide a larger main to Pontrhydygroes which would give an improved supply to that village and also supply nine houses for the first time.
- (xix) An extension from Llanilar to Lldiardau on the Trawscoed road to supply three houses.
- (xx) A scheme to provide a larger main from Llanwnen to Alltyblacca to supply fourteen new houses at Alltyblacca.
- (xxi) A supply to two farms and a caravan site at Borth.

Sewerage Schemes

The following proposals for new sewerage schemes were approved during the year :

- (i) A revised scheme for Talybont by the Aberystwyth R.D.C. to cater for one hundred and seventy-seven properties in that village, at an estimated cost of £88,000.
- (ii) A combined scheme for Cross Inn (Llanon) and Nebo by the Aberaeron R.D.C. to cater for thirty-one existing properties and twenty houses proposed to be built there, at an estimated cost of £29,000.
- (iii) A combined scheme for the villages of Nanternis, Caerwedros and Llwyn-dafydd by the Aberaeron R.D.C. to cater for seventy-four properties, at an estimated cost of £70,000.
- (iv) A scheme for the village of Gorsgoch by the Aberaeron R.D.C. at an estimated cost of £19,000.
- (v) A revised scheme for the villages of Felinfach and Ystrad by the Aberaeron R.D.C. to cater for eighty-seven properties, at an estimated cost of £45,000. (This proposal was referred back for further consideration by the R.D.C. in order to see whether the proposed sewers could be extended to take in further properties on the Temple Bar road).

During the year work was carried out on the following schemes which had previously been approved :—

- (i) The Henllan Sewerage Scheme was completed by the Teifside R.D.C.
- (ii) Work continued on the Llanddewi Brefi Sewerage Scheme by the Tregaron R.D.C., and has now been completed.
- (iii) The Tresaith Sewerage Scheme was completed by the Teifside R.D.C.
- (iv) Work continued on the Llechryd Sewerage Scheme by the Teifside R.D.C. and has now been almost completed apart from the construction of the sewage disposal works.
- (v) A contract was accepted and work commenced on the Aberporth Sewerage Scheme by the Teifside R.D.C.
- (vi) The Llwynycelyn Sewerage Scheme was completed by the Aberaeron R.D.C.
- (vii) Work continued on the Cribyn Sewerage Scheme by the Aberaeron R.D.C. Most of the sewers had been laid, and the disposal works are nearing completion.
- (viii) The Alltyblacca Sewerage Scheme was carried out by the Aberaeron R.D.C. Proposals are awaited for a further extension to this scheme.

CARDIGANSHIRE EDUCATION COMMITTEE

ANNUAL REPORT

of the

PRINCIPAL SCHOOL MEDICAL OFFICER

for the year

1964

To the Chairman and Members of the Education Committee

I have pleasure in presenting the Annual Report of the School Health Service for the year which ended on 31st December, 1964.

It is gratifying to report that the new comprehensive building at Aberystwyth which includes a child guidance unit and accommodation for audiometry was well under construction at the end of the year. The building is due to be completed before the end of 1965.

The medical, dental, and health visitor/school nurse staffs are, I am glad to state, up to their full establishment and we are receiving periodic enquiries from doctors and health visitors for vacancies that are not at present available. Not many local authorities in Britain are in such a happy position.

A detailed account of the Department's work will be found in the ensuing pages. The section on Dental Health has been prepared by Mr. W. D. Percival Evans, the Principal Dental Officer, and that on the School Psychological Service by Dr. Cyril James. Mr. Evan Richards, the County Public Health Inspector, reports on matters falling within his particular sphere of duty.

I. MORGAN WATKIN,

Principal School Medical Officer

REPORT OF MR. W. D. PERCIVAL EVANS,
PRINCIPAL DENTAL OFFICER

I have pleasure in presenting my Thirty fourth Annual Report. During this long period we have seen many changes both in Public Health and Dental Health but Dental Disease still continues to be a matter of grave concern. Especially when we know that about 15,000,000 people in Britain have false teeth and that, of these, an increasing number every year are school children.

Up to the present the principal measures for safeguarding dental health have been as follows :—

(i) Nutrition

As the formation of the teeth of a child begins four months before it is actually born, the diet of the expectant mother is of great importance. It should be rich in *vitamins* and in those articles of food containing calcium.

(ii) Eating Habits of Children

The eating of food should be confined to meal times and the eating of biscuits, sweets, buns, sweet cordials especially between meals should be avoided.

Foods such as raw fruits which help to clean the teeth naturally should be taken regularly at the end of a meal.

(iii) Hygiene of the Mouth and Teeth

Cleaning of the teeth at the end of every meal is to be encouraged or indeed the mouth should be rinsed with clean water, the water being forced with some vigour between the teeth and so help to dislodge food particles which have remained in the crevices and spaces between the teeth.

(iv) Dental Inspection and Early Treatment of School Children

This is obviously necessary for preserving the teeth—we know that the teeth cannot look after themselves and a visit to the dentist at least twice a year is essential.

The School Dental Service for many years has been woefully short of man-power. Now it is getting more and more difficult to get dental treatment even in private practice because in some areas private dentists are in short supply. In this County, for example, whereas eight dentists have either died or retired from practice no one has come along to fill their place.

It is obvious then that everything that is done in schools to prevent dental troubles at an early age is an act of sound common sense.

Whatever the criticisms that can be made about the School Dental Service it is a fact that it is an organisation which ensures that the teeth of all school children are examined and that the parents are informed of the findings. If consent is obtained then treatment is also arranged by the school dental service—or indeed they may wish to make their own arrangements. Either way the influence of the teachers on the children, and indeed often on the parents together with their support and co-operation has always been a great help both in instructing the children in oral hygiene and in persuading the parents to have their children treated.

Yet in spite of much propaganda towards the improvement of Dental Health Education we find it very difficult at the present time to persuade our children to give up sugars, sweets and carbohydrate foods which they enjoy so much.

Due to propaganda at school, on television and in the press, it may be possible that we can be more successful in persuading children to clean their teeth. Unfortunately, good as this may be, diligent cleaning is not enough to ensure sound teeth and the claims made by manufacturers of toothpastes have been disappointing. The exception, perhaps, are those containing *Fluoride* which tend to show more promise. Even so, it is difficult to believe that they will make a significant contribution in reducing dental disease.

Is there any other factor which would help then to solve the problem? Yes. For more than forty years it has been shown that the presence of Fluoride in drinking water affects dental health.

Studies in Britain and other countries have shown that children born and brought up in areas where the water naturally contains fluoride (at a level of one part per million) have less than half the dental decay of children in areas where there is no fluoride or only a trace. Their teeth are well formed, of good appearance and for generations have enjoyed normal health.

Reports of schemes undertaken in Anglesey, Watford, and Kilmarnock and published in 1962 (H.M.S.O. Reports on Public Health and Medical Subject No. 105) show that :—

- (a) Dental decay was cut by more than half and nearly twice as many children as formerly had sound teeth.
- (b) No evidence of harm from fluoridation could be found despite the closest watch by all concerned.
- (c) No technical difficulties arose in adding fluoride to water supplies and maintaining it accurately at the specified level.

The Minister of Health and his expert advisers on the Medical and Dental Advisory Committees have strongly urged the general adoption of fluoridation of our water supplies. They are satisfied that no harmful effects will result. Nature has shown what happens when fluoride is present naturally in water supplies. Dental disease is halved.

It is hoped that parents will press strongly that the water supplies of our country are such that they will contain the necessary materials for the proper calcification of their children's teeth.

This is a matter of great importance to the rising generation. The co-operation of all people interested in Dental Health and especially the Members of our Local Authorities would be a great help towards solving the problem.

A table showing treatment carried out by the Dental Officers of the Authority may be seen in the Table at the end of the Medical Officer's Report.

REPORT OF MR. EVAN RICHARDS, COUNTY PUBLIC HEALTH INSPECTOR

Milk-in-Schools Scheme :

All schools in the county continued to be supplied with milk under the Milk-in-Schools Scheme throughout the year. Out of 107 establishments covered by this scheme, 90 receive a supply in one-third pint bottles with drinking straws and the remaining 17 receive their supplies in bulk containers direct from neighbouring farms.

Of the 90 schools receiving a bottled supply, 27 obtain pasteurised milk and the remainder is Untreated Farm-Bottled milk (formerly known as T.T.). The scattered location of the schools makes it very difficult to increase the number of schools receiving pasteurised milk, but every effort is made to achieve this wherever possible. Of the 63 schools receiving a bottled supply of non-pasteurised milk, 28 receive their supplies from a large farm near Aberystwyth ; it is hoped that a pasteurising plant will be installed at this dairy in the coming year and the opportunity will be taken of obtaining a pasteurised supply for these schools.

During the year 173 visits were made to schools, farms and dairies in connection with this scheme for the purpose of checking the bottling arrangements, sampling and investigating complaints which, although few in number, are bound to arise from time to time with a perishable commodity like milk.

School Kitchens and Canteens

School kitchens and canteens are subject to the control of the Food Hygiene Regulations in the same way as any other catering establishment where food is prepared for sale, and in this respect the Education Committee finds itself in the role of being the largest caterer within the area, being responsible for supplying over 120,000 meals per annum from 92 canteens.

The general standard of hygiene at these kitchens and canteens is good and the cooks take a personal pride in the cleanliness and appearance of the premises. Improvements of a minor nature such as the replacement of wooden draining boards and table tops by stainless metal drainers and laminated table tops respectively were carried out at several canteens during the year. Whenever any defects are found which are of a nature that could affect the hygienic handling, preparation or storage of food, they are reported to the County Architect who immediately arranges for such defects to be rectified.

A new kitchen was built at Llechryd C.P. School so that meals could be prepared at the school, instead of being transported from the Central Kitchen at Cardigan. A new Kitchen-Dining Room is being built at Aberbanc C.P. School to replace the old Nissen Hut that has been used for such a purpose there since the end of the war. Extensions were also carried out to the kitchen at Cardigan Grammar School.

During the year 247 visits were made to the various canteens for the purpose of checking on the quality of the various foodstuffs supplied thereto.

School Water Supplies and School Sanitation

Water-borne sanitary conveniences were installed at Castell Flemish C.P. School during the year to replace the Elsan system that had been in use there for some years. The only schools that now remain on that system are Goginan, Penllwyn and Blaenporth, three schools that are to be replaced by new schools in the coming year.

Although all the schools are now provided with modern sanitary conveniences, only those in the towns and the larger villages are connected to the public sewers, and the remainder are serviced with small cesspools or septic tanks. Routine inspections are paid to such plants to check on their efficiency and to prevent insanitary conditions. It is the policy of the Education Committee to abandon all such plants whenever a mains sewerage scheme becomes available, and Penlon C.P. School was connected to the new sewerage system installed at Llwyncelyn.

Only two schools in the county now remain that are dependent on shallow wells on account of the absence of a mains water supply, namely Brynherbert C.P. School and Cofadail C.P. School, and it is anticipated that a mains supply may become available for the former within the next year.

EVAN RICHARDS,
County Public Health Inspector.

SCHOOL PSYCHOLOGICAL SERVICE

Report of Dr. Cyril James, Consultant Psychologist

The School Psychological Service in Cardiganshire, as in previous years, has continued to function along lines which have since become familiar in the pamphlet issued by the British Psychological Society (September 1962). Such a service organised according to Department of Education and Science Circulars 347 and 11/61 is working in close association with the School Health Service and the teaching staff of the schools. The Psychologist also works as a member of the Child Guidance Team in co-operation with the Consultant Child Psychiatrist and Social Workers.

The advisory and clinical work together forms a psychological service to schools which aims at contributing to the healthy development of children through the application of psychological knowledge to education and mental health—including the development and operation of facilities for ordinary as well as handicapped pupils.

Details of children clinically examined by the Educational Psychologist during 1964 and recommended for various forms of Special Educational Treatment are given as follows. :—

Table I—PSYCHOLOGICAL DIAGNOSTIC EXAMINATIONS

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
(i) Educationally			
(a) Retarded	9	3	12
(b) Backward	1	0	1
(c) Dull	6	0	6
Total	16	3	19
(ii) Subnormal (unsuitable for education at school)	3	3	6
(iii) Maladjusted (wholly)	1	0	1
(iv) For Educational Guidance	0	2	2
(v) Gifted Pupils	1	0	1
Grand Total	5	5	10

The following children were recommended for various types of treatment. :—

Table II

RECOMMENDATIONS FOR SPECIAL EDUCATIONAL TREATMENT

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Residential Special School ...	6	0	6
Ordinary School : Remedial Unit ...	4	0	4
Ordinary School : Observation ...	17	4	21
Junior Training Centre (Folinfach)	3	3	6
Audiometric Examination ...	1	0	1
Speech Therapy ...	0	0	0
Psychiatric Referral ...	6	0	6
Paediatric Referral ...	4	1	5
Neurological Referral ...	1	1	2
Remedial Teaching ...	11	2	13
Vocational Guidance* ...	3	1	4
Educational Guidance ...	0	2	2
Hospital Special Units† ...	0	3	3
Home Tuition ...	0	0	0

*—3 Highmead R.S.S. leavers referred to Youth Employment Officer.

†—1 Morriston Hospital (Paed/Psych/Neur/Exam.)

1 Bridgend Sunshine Home Panel (Glam. L.E.A.)

1 Erw'r Delyn Panel (Glam. L.E.A.)

In addition to the above children examined by the Psychologist during 1964 action was taken in respect of the special educational treatment of others examined in previous years.

During the year, the work of screening children for Highmead Residential Special School for E.S.N. pupils continued and the school again had a full complement of pupils. A waiting list developed in the three counties although the Department of Education and Science has now agreed to extend the school by forty places as well as to supply extra facilities for physical training, pottery and craftwork.

Alternative local arrangements for special educational treatment have continued to improve and excellent work is being done in the remedial units established in the primary and secondary schools.

As in previous years a survey was made of those children provisionally deemed by the headteachers to require special educational treatment. The statistics are as follows :

Table III

SURVEY OF PUPILS DEEMED PROVISIONALLY TO REQUIRE S.E.T.

	8+ Age Groups			All Age Groups		
	Boys	Girls	Total	Boys	Girls	Total
Subnormal	5	2	7	7	2	9
Dull	29	4	33	36	5	41
Backward	42	18	60	52	26	78
Retarded	15	7	22	19	10	29
Maladjusted	14	3	17	16	5	21
Total	105	34	139	130	48	178

The following statistics relate to children admitted to and discharged from Highmead Residential Special School during 1964.

Table IV

S.E.T. AT HIGHMEAD RESIDENTIAL SPECIAL SCHOOL FOR E.S.N. PUPILS

	Admissions 1964			Discharges 1964			Resident 1.1.65		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Cardiganshire	3	0	3	3	1	4	9	2+1	11+1
Pembrokeshire	3	2	5	2	1	3	11	14	25
Carmarthenshire	7	7	14	6	6	12	25	18	43
Out/County	—	—	—	2	—	2	—	1	1
Total	13	9	22	13	8	21	45	35+1	80+1

This includes 1 Cardiganshire child attending as a day pupil.

One child attending the school is an extra district pupil (viz. Oxford.)

Highmead Residential Special School continues to enjoy a good reputation in the West. Parents, with few exceptions, are happy to take up the places offered to them. The pupils themselves are making relatively satisfactory progress in relation to the limitations of their disabilities. The relaxed atmosphere allied to the benevolent discipline produces a secure scholastic environment which enables the children to proceed at their own pace. Several facilities have been improved and the planning of the new extensions is in an advanced stage. The screening procedure before entry ensures that account is taken of the medical, psychological and social factors which affect the child's educational progress. Again, visits have been paid to the school by many interested bodies. Both the scholastic and domestic staff follow an even tenor which is appreciated by both parents and children.

Through the joint consultation of the Medical Officers of Cardiganshire and Carmarthenshire the services of a trained Speech Therapist continued to be made available to the school. Likewise through the co-operation of the Directors of Education of the three authorities concerned the respective Youth Employment Officers have arranged for the school leavers to receive Vocational Guidance. The provision of after-care to pupils who have left school presents a serious problem.

It is of interest to note that the progress of children is under constant and systematic review by the Psychologist in consultation with the headteacher whilst the medical arrangements are equally thorough.

Throughout the three counties all age groups are systematically surveyed by means of a Handicapped Pupils Return and with the passage of time and the increased availability of sessions given by the School Medical Officers, it should be possible in the near future to complete the individual ascertainment of all referrals made from the school population.

Arrangements have been made for the following handicapped pupils to receive Special Educational Treatment at Residential Special Schools.

Table V—S.E.T. AT RESIDENTIAL SPECIAL SCHOOLS

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Blind	0	1	1
Partially Blind	0	2	2
Deaf	2	2	4
Impaired Hearing	1	0	1
Delicate	0	1	1
Physically Handicapped (Misc.) ...	4	3	7
Maladjusted	4	1	5
Epileptic... ..	—	—	—

Further consultations have taken place with reference to the urgent need for the establishment of a day-cum-residential diagnostic unit at Carmarthen for handicapped pupils who present special problems of placement and treatment. Agreement has been reached in principle and a site is being sought in Carmarthen where advantages accrue from its central position and proximity to various ancilliary facilities.

A Remedial Unit was established at Penparcau C.P. School in September, 1964, and staffed by a qualified teacher (holding a third year certificate). The unit is instructed to give special educational treatment to pupils of good intelligence where educational progress has been relatively limited by the adverse effect of ill health or difficult sociological circumstances.

Thirteen pupils were placed in the unit upon the recommendation of the School Medical Officer and the Psychologist who had carried out a detailed physical and mental examination of the children. They ranged in intelligence from I.Q. 72 to 153 and were initially referred by parents (3) and headteachers (10).

Close liaison was maintained with the schools (26 visits) and the homes (2 visits) whilst all parents attended the unit itself on various occasions. The children themselves travel by public transport and are given free vouchers.

The children are taught in carefully selected groups: the atmosphere is one of permissive benevolent discipline. In the short period of tuition rapport has been established with the pupils so that they have shown a marked improvement educationally and socially. Two pupils, however, require a modified form of residential treatment.

It is envisaged that two subsidiary units will be opened in the near future—one at Cardigan and the other at Lampeter.

This Remedial Unit works under the direction of the School Psychological Service in consultation with the School Health Service. The School Library Service also pays a valuable part in supplying books.

This new unit has been well received by parents and teachers.

By dovetailing school records, including the results of the eleven plus allocation assessments with clinical records, it has been possible through the school psychological service to facilitate the provision of a variety of types of education for different categories of pupils in such a way that all children ranging from the quick to the slow and the physically handicapped have an equal opportunity of profiting from an education suited to the particular stage of their development—physically, mentally and socially. In respect of the latter the co-operation of the Mental Health section of the Health Department has been greatly appreciated particularly the work of the health visitors and social workers.

In brief there has been close liaison between the School Psychological Service and the School Health Service as well as with the schools themselves whilst both the statutory services of the Local Authority and the Regional Hospital Board have played their part in fostering the educational progress and mental health of the children, the fit and the handicapped, through an integrated and comprehensive approach to their problems.

CYRIL B. E. JAMES,

Consultant Educational Psychologist

**Part I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
AND ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

Table A—PERIODIC MEDICAL INSPECTIONS

**Number of Pupils on Registers of Maintained Primary and Secondary Schools in
January, 1965 ... 8,701.**

Age Groups Inspected (By year of Birth)	No. of Pupils who have received a full medi- cal examin- ation	PHYSICAL CONDITION OF PUPILS INSPECTED		No. of Pupils found not to warrant a medical examin- ation	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satis- factory	Unsatis- factory		for de- fective vision (excluding squint)	for any other con- ditions recorded at Part II	Total individual pupils
		No.	No.				
1960 and later	0	0	0	—	0	0	0
1959	197	196	1	—	15	105	115
1958	257	256	1	—	21	142	155
1957	47	45	2	—	4	23	24
1956	28	28	0	—	5	14	16
1955	25	25	0	—	4	11	14
1954	26	26	0	—	2	13	14
1953	514	512	2	—	63	186	225
1952	212	210	2	—	27	63	81
1951	54	53	1	—	3	19	19
1950	390	390	0	—	42	140	168
1949 and earlier	161	160	1	—	14	47	60
TOTAL	1,911	1,901	10	—	200	763	891

99.48% of the pupils examined were found to be in a satisfactory physical condition, the percentage unsatisfactory being 0.52%.

Table B—OTHER INSPECTIONS

Notes :—A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections ...	...	...	42
Number of Re-inspections ...	...	...	833
		Total ...	875
			—

Table C—INFESTATION WITH VERMIN

Notes :—All cases of infestation, however slight, are included in Table C.

The numbers recorded at (b), (c) and (d) relate to individual pupils, and not to instances of infestation.

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons ...	...	...	33,769
(b) Total number of individual pupils found to be infested ...	...	...	302
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ...	...	...	Nil
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ...	...	...	Nil

Part II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

Table A—PERIODIC INSPECTIONS

Note :—All defects, including defects of pupils at Nursery and Special Schools, noted at periodic medical inspections are included in this Table, whether or not they are under treatment or observation at the time of the inspection. This Table includes separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defect Code No.	Defect or Disease				PERIODIC INSPECTIONS			
					Entrants	Leavers	Others	Total
4	Skin	T			1	5	1	7
		O			14	22	14	50
5	Eyes— <i>a.</i> Vision	T			41	86	60	187
		O			10	59	27	96
	<i>b.</i> Squint	T			5	1	1	7
		O			7	1	1	9
	<i>c.</i> Other	T			—	4	—	4
		O			4	4	3	11
6	Ears— <i>a.</i> Hearing	T			2	—	1	3
		O			8	4	4	16
	<i>b.</i> Otitis Media	T			1	1	—	2
		O			12	6	7	25
	<i>c.</i> Other	T			—	—	—	—
		O			2	1	2	5
7	Nose and Throat	T			18	3	4	25
		O			118	41	59	218
8	Speech	T			6	4	2	12
		O			8	2	3	13
9	Lymphatic Glands	T			4	1	—	5
		O			61	28	25	114
10	Heart	T			1	1	—	2
		O			30	19	14	63

Defect Code No.	Defect or Disease				PERIODIC INSPECTIONS				
					Entrants	Leavers	Others	Total	
11	Lungs	...	...	...	T	3	5	2	10
					O	18	16	16	50
12	Developmental— <i>a.</i> Hernia	...	...	...	T	—	—	1	1
					O	5	—	1	6
	<i>b.</i> Other	...	...	...	T	5	1	1	7
					O	1	13	10	24
13	Orthopaedic— <i>a.</i> Posture	...	...	...	T	2	21	5	28
					O	8	18	30	56
	<i>b.</i> Feet	...	...	...	T	26	12	24	62
					O	51	20	39	110
	<i>c.</i> Other...	...	...	...	T	6	18	4	28
					O	18	15	16	49
14	Nervous System— <i>a.</i> Epilepsy	...	...	...	T	2	—	—	2
					O	—	4	1	5
	<i>b.</i> Other	...	...	...	T	—	—	1	1
					O	—	1	3	4
15	Psychological— <i>a.</i> Development	...	...	...	T	—	—	1	1
					O	7	4	7	18
	<i>b.</i> Stability	...	...	...	T	1	—	1	2
					O	3	1	2	6
16	Abdomen	...	...	...	T	2	—	—	2
					O	12	—	4	16
17	Other	...	...	...	T	2	2	—	4
					O	17	8	9	34

Table B—SPECIAL INSPECTIONS

Note :—All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections are included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code No.	Defect or Disease	Special Inspections	
		Pupils Requiring Treatment	Pupils Requiring Observation
4	Skin	2	1
5	Eyes :		
	(a) Vision	2	1
	(b) Squint	—	1
	(c) Other	—	—
6	Ears :		
	(a) Hearing	2	1
	(b) Otitis Media	—	—
	(c) Other	—	—
7	Nose and Throat	1	1
8	Speech	—	1
9	Lymphatic Glands	—	—
10	Heart	—	—
11	Lungs	—	—
12	Developmental		
	(a) Hernia	—	—
	(b) Other	—	—
13	Orthopaedic :		
	(a) Posture	1	1
	(b) Feet	1	1
	(c) Other	—	—
14	Nervous system :		
	(a) Epilepsy	—	—
	(b) Other	—	—
15	Psychological :		
	(a) Development	2	—
	(b) Stability	—	—
16	Abdomen	—	—
17	Other	1	1

**Part III—TREATMENT OF PUPILS ATTENDING MAINTAINED AND
ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

Table A—Eye Diseases, Defective Vision and Squint

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	—
Errors of refraction (including squint) ...	247
Total	247
Number of pupils for whom spectacles were prescribed	91

Table B—Diseases and Defects of Ear, Nose and Throat

	Number of cases
Received operative treatment	
(a) for diseases of the ear	4
(b) for adenoids and chronic tonsillitis ...	154
(c) for other nose and throat conditions ...	24
Received other forms of treatment ...	248
Total	430
Total number of pupils in schools who are known to have been provided with hearing aids :	
*(a) in 1963	—
(b) in previous years	—

*A pupil recorded under (a) above is not recorded at (b) in respect of the supply of a hearing aid in a previous year.

Table C—Orthopaedic and Postural Defects

	Number of cases
(a) Pupils treated at clinics or out-patients departments	660
(b) Pupils treated at school for postural defects	10
Total	670

Table D—Diseases of the Skin

(excluding uncleanliness, for which see Table C of Part I)

	Number of cases known to have been treated
Ringworm—(a) Scalp ...	2
(b) Body ...	8
Scabies	—
Impetigo	21
Other skin diseases ...	12
Total	43

Table E—Child Guidance Treatment

	Number of Pupils
Treated at Child Guidance Clinics ...	6

Table F—Speech Therapy

	Number of cases
Pupils treated by speech therapists	158

Table G—Other Treatment Given

	Number of cases known to have been treated
(a) Pupils with minor ailments	—
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination ...	594
(d) Other than (a), (b) and (c) above ...	—
TOTAL	594

Part IV—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

No. of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January 1965 ... 8,701

(a) Dental and Orthodontic work

I. Number of pupils inspected by the Authority's Dental Officers :

i At Periodic Inspections	6,584		
ii As Specials	443	Total	7,027

II Number found to require treatment	...				5,315
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III. Number offered treatment	3,887
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IV. Number actually treated	2,588
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(b) Dental work (other than Orthodontics)

I. Number of attendances made by pupils for treatment, excluding those recorded at (c) i below

below	5,125
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II. Half days devoted to :

i. Periodic (School) Inspections	...	82			
ii. Treatment	...	1,111	Total		1,193

III. Fillings :	i. Permanent Teeth	...	2,995		
	ii. Temporary Teeth...	...	202	Total	3,197

IV. Number of Teeth Filled :

i. Permanent Teeth	...	2,317			
ii. Temporary Teeth	...	154	Total		2,471

V. Extractions :	i. Permanent Teeth	...	1,128		
	ii. Temporary Teeth	...	2,655	Total	3,783

VI. i. Number of general anaesthetics given for extractions					1,755
---	--	--	--	--	-------

ii. Number of half days devoted to the administration of general anaesthetics by :

(a) Dentists	...	50			
(b) Medical Practitioners	...	191	Total		241

VII. Number of pupils supplied with artificial teeth					50
--	--	--	--	--	----

VIII. Other operations :	i. Crowns...	...	18		
	ii. Inlays	...	—		
	iii. Other Treatment	...	706	Total	724

(c) Orthodontics

i. Number of attendances made by pupils for orthodontic treatment					344
---	--	--	--	--	-----

ii. Half days devoted to orthodontic treatment	...	Nil treated in normal treatment sessions			
--	-----	--	--	--	--

iii. Cases commenced during the year		36
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iv. Cases brought forward from the previous year		33
--	-----	-----	-----	--	----

v. Cases completed during the year		11
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vi. Cases discontinued during the year		4
--	-----	-----	-----	--	---

vii. Number of pupils treated by means of appliances		55
--	-----	-----	-----	--	----

viii. Number of removable appliances fitted		54
---	-----	-----	-----	--	----

ix. Number of fixed appliances fitted		5
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x. Cases referred to and treated by Hospital Orthodontics					
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All models of orthodontic cases are referred to orthodontic consultants at Guy's Hospital.

SCHOOL CLINICS, 1964

Clinic	Location		Number of sessions held	Total number of sessions held
	Local Authority Premises	Other Premises		
Minor ailments	—	—	—	—
Dental	Aberystwyth Aberaeron Cardigan Lampeter Llandysul Tregaron Dinas Highmead R.S.S.	— — — — — — — —	570 59 87 72 36 14 10 32	880 (This total does not include dental sessions held in classrooms of primary schools).
Ophthalmic ...	—	Aberystwyth	96	96
Orthopaedic ...	Aberystwyth Cardigan — — — — —	— — Aberaeron Lampeter Llandysul New Quay Penrhiwllan Tregaron	23 16 10 9 7 3 1 2	71
Speech Therapy	Aberystwyth Aberystwyth C.P. School Ardwyn Cardigan C.P. Cardigan Infts. Dinas Penparcau C.P. Penparcau Infts. Penyparc C.P. Tregaron Grammar Verwig Ysgol Gymraeg — —	— — — — — — — — — — — — — Lampeter Llandysul	23 18 11 21 11 12 12 12 19 9 4 10 14 15	191

**HEALTH VISITORS/SCHOOL NURSES' REPORT ON SCHOOL WORK FOR THE
YEAR ENDED 31st DECEMBER, 1964**

District	Names of Schools visited	No. of Times visited	No. of Children examined	Number found to be verminous or suffering from minor ailments
Penglais Llanbadarn and Capel Bangor	Cwmpadarn	12	301	19
	Capel Seion	11	154	7
	Goginan	10	95	1
	Penllwyn	9	183	14
	Ardwyn Grammar	10	209	6
	Total	52	942	47
Penparcau and Llanfarian	Llanfarian	14	351	1
	Llanilar	13	293	—
	Penparcau Infants	15	999	17
	Penparcau Juniors	14	637	41
	Total	56	2,280	59
Aberystwyth Town Centre and Devil's Bridge	Aberystwyth, C.P.	34	944	3
	Mynach	12	186	2
	Ponterwyd	17	266	—
	Ysgol Gymraeg	13	211	—
	Total	76	1,607	5
Rhydypennau Talybont and Glandyfi	Borth	5	101	5
	Borth V.P.	6	125	1
	*Commins Coch	10	257	20
	Eglwysfach	4	30	1
	Rhydypennau	6	153	—
	*Taliesin	8	174	6
	Talybont	6	185	11
	Trefeurig	5	96	—
	Penrhyncoch	4	118	2
	Dinas Secondary	23	1,036	54
	Total	77	2,275	100
Aberystwyth South	*Bronant	10	210	—
	Brynherbert	13	240	5
	*Cofadail	12	166	1
	Cross Inn	13	231	1
	*Llanafan	13	425	18
	*Llanfihangel	8	202	—
	*Llangwryfon	8	136	—
	Llanon	15	614	3
	*Lledrod	10	104	—
	*Myfenydd	17	546	44
	Total	119	2,874	72
Aberaeron	Aberaeron	17	1,243	3
	Aberarth	13	250	5
	Cileennin	13	279	4
	Ciliau Parc	14	214	—
	Dihewid	15	387	7
	Mydroilyn	15	357	5
	Penlon	16	536	5
	Pennant	14	221	5
	Aberaeron Sec.	19	1,079	4
	Total	136	4,566	38

*Relief work

HEALTH VISITORS/SCHOOL NURSES' REPORT ON SCHOOL WORK—Continued

District	Names of Schools visited	No. of Times visited	No. of Children examined	Number found to be verminous or suffering from minor ailments
Lampeter	Bwlchyllan	8	71	—
	Cellan	10	285	—
	Cribyn	3	88	—
	Felinfach	7	238	—
	Ffynnonbedr	14	790	2
	Gartheli	11	196	10
	Llanfair	13	135	—
	Llangybi	12	213	3
	Llanwnnen	10	291	—
	Betws Bledrws	10	72	—
	Trefilan	7	145	—
	Silian	9	179	5
	Highmead Res.	17	911	50
	Lampeter Sec.	20	157	—
	Total	151	3,771	70
Llandysul	Adpar	9	226	—
	Blaenau	8	171	—
	Brongest	9	97	—
	Capel Dewi	8	188	—
	Capel Cynon	10	119	—
	Coedybryn	11	144	—
	Cwrtnewydd	9	220	—
	Llandysul	9	547	—
	Pontshaen	14	342	10
	Tregroes	9	308	—
	Aberbanc	8	362	—
	Llanwenog	10	254	3
	Llandysul Grammar	7	420	1
	Total	121	3,398	14
Cardigan	Beulah	11	432	—
	Cardigan Juniors	12	2,299	37
	Cardigan Infants	13	1,371	20
	Llechryd	13	568	—
	Penyparc	13	999	1
	Trewen	11	479	1
	Verwig	12	388	—
	Llandygwydd V.P.	11	407	—
	*Cardigan Secondary	8	926	—
	Total	104	7,869	59
Llangranog	Aberporth	10	495	4
	Caerwedros	5	70	—
	Glynarthen	11	203	2
	Gwenlli	6	82	1
	Llanarth	9	208	2
	Llanllwchaearn	8	125	—
	New Quay	7	258	2
	Penmorfa	8	183	4
	Pontgarreg	5	127	1
	Rhydlewis	9	121	5
	Talgarreg	8	212	3
	Blaenporth	8	212	—
	Total	94	2,296	24
Tregaron	Castell Flemish	12	61	4
	Llanddewi Brefi	14	208	7
	Llangeitho	14	277	2
	Penuwch	14	141	—
	Pontrhydfendigaid	13	254	2
	Swyddffynnon	15	113	—
	Tanygarreg	14	111	—
	Tregaron	14	471	1
	Ysbytty Ystwyth	14	164	—
	Tregaron Sec.	11	89	—
	Total	135	1,889	16

*Relief work

**REPORT OF WORK DONE BY THE ORTHOPAEDIC SISTER FOR
THE YEAR 1964**

AREA	No. of Clinics held during Year	Attendances			No. of cases of Remedial Exercises Manipulation and Massage
		New Cases	Others	Total	
Aberaeron ...	10	32	57	89	73
Aberystwyth	23	47	165	212	168
Cardigan ...	16	23	98	121	96
Lampeter ...	9	30	66	96	77
Llandysul ...	7	3	59	62	50
Penrhiwllan ...	1	6	—	6	6
New Quay ...	3	1	14	15	8
Tregaron ...	2	7	15	22	15
TOTALS ...	71	149	474	623	493

In addition 214 domiciliary visits were carried out by the Orthopaedic Sister.

Lewis
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Llandysul